| | પ્રાd hics. Yes ☐ No 🗹 | scome, transactions, or liabilities of a spouse or dependent child es" unless you have first consulted with the Committee on Ethics. | Exemptions— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethic |
|---------------|--------------------------------------|---|--|
| | Yes 🗌 No 🗹 | tee on Ethics and certain other "excepted trusts" need not be ist benefiting you, your spouse, or dependent child? | Trusts Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? |
| . | STIONS | ATION ANSWER EACH OF THESE QUESTIONS | EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE |
| | | schedule attached for each "Yes" response. | If yes, complete and attach Schedule V. |
| | and the appropriate | Each question in this part must be answered and the appropriate | Did you, your spouse, or a dependent child have any reportable liability (more V. than \$10,000) during the reporting period? ✓ |
| | | If yes, complete and attach Schedule IX. | If yes, complete and attach Schedule IV. |
| | outside Yes No 🗸 | Did you have any reportable agreement or arrangement with an outside IX. entity? | Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting Yes No |
| | | If yes, complete and attach Schedule VIII. | If yes, complete and attach Schedule III. |
| · | ling in the Yes ☑ No □ | Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year? | Did you, your spouse, or a dependent child receive "uneamed" income of III. more than \$200 in the reporting period or hold any reportable asset worth Yes W No more than \$1,000 at the end of the period? |
| | | If yes, complete and attach Schedule VII. | if yes, complete and attach Schedule II. |
| | ile travel or nan \$335 Yes 🗌 No 🗹 | Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)? | Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period? Yes No |
| | | If yes, complete and attach Schedule VI. | If yes, complete and attach Schedule i. |
| | wise Yes No | Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise | Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 ✓ No |
| | | QUESTIONS | PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS |
| | more than 30 days late. | Termination Date: | Report ☐ Annual (May 15) ☐ Amendment ☐ Termination |
| | be assessed against anyone who files | Employee | W _ |
| ENIAHVES | A \$200 penalty shall | Officer Or Employing Office: | Filer Member of the U.S. State: PA |
| | Moffice, Use Only) | (Daytime Telephone) | (Full Name) |
| 4: 08 | M 2011 NOV 17 PM 4: 08 | (202) 225-4276 | Michael G. Fitzpatrick |
| S 11M30 3 | LEGISI ATIVE RESOURCE CENTER | | |
| ERED | HAND DELIVERED | FORM A Page 0 of 7 For use by Members, officers, and employees | UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT |
| | | | |

SCHEDULE I - EARNED INCOME

Name Michael G. Fitzpatrick

Page 2 of 7

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

| Source | Туре | Amount |
|--|--------|-----------|
| Begley Carlin &Mandio | Salary | \$161,538 |
| Office of Catholic Education, Archdiocese of Philadelphia | Salary | N/A |
| The state of the s | | |

| SCHEDUL | SCHEDULE III - ASSETS AND "UNEARNED" INCOME | Name Michael G. Fitzpatrick | 3. Fitzpatrick | | Page 3 of 7 |
|---|--|--|--|--|--|
| | BLOCK A | вгоск в | вгоск с | BLOCK D | BLOCK E |
| Ass | Asset and/or Income Source | Year-End | Type of Income | Amount of Income | Transaction |
| Identify (a) ea a fair market and (b) any o more than \$2 | Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. | Value of Asset at close of reporting year. If you use a valuation method other | Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that | For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income feach as 404(k) place or | Indicate if asset had purchases (P), sales (S), or exchanges (E) |
| Provide com symbols.) | Provide complete names of stocks and mutual funds (do not use ticker symbols.) | than fair market value, please specify the | generate tax-deferred income (such as 401(k) | IRAs), you may check the "None" column. For all other | \$1,000 in reporting year. |
| For all IRAs a self-directed exercised, to | For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e.,plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each | asset was sold and is included only because it is generated income, | check the "None" column. Dividends, interest, and capital gains, | of income by checking the appropriate box below. Dividends, interest, and | |
| asset held in the retirement accou of the institution reporting period. | asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. | the value should be "None." | even if reinvested, must be disclosed as income. Check "None" if the asset generated no income | capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was | |
| For rental or address. | For rental or other real property held for investment, provide a complete address. | | period. | gono | |
| For an owner publically tra | For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A. | | | | |
| Exclude: You vacation hom | Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting | - | | | |
| | Viriva Community C.U. | \$1,001 - \$15,000 | None | NONE | |
| | County of Bucks Employee Retirment | \$50,001 - \$100,000 | None | NONE | |
| | Merrill Lynch Wealth Management Portfolio: | | | | |
| | Bank of America Money Fund | \$1,001 - \$15,000 | None | NONE | |
| | BIF Money Fund | \$15,001 - \$50,000 | None | NONE | |
| | Dendreon Corp | \$1,001 - \$15,000 | None | NONE | |

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| SCHEDU | SCHEDULE III - ASSETS AND "UNEARNED" INCOME | Name Michael G. Fitzpatrick | 3. Fitzpatrick | | Page 4 of 7 |
|--------|---|-----------------------------|----------------|------|-------------|
| | Pimco Total Return Fund | \$15,001 - \$50,000 | None | NONE | |
| | Nuveen Tradewinds Intl Value Fund | \$1,001 - \$15,000 | None | NONE | |
| | Columbia Midcap Value Fund | \$1,001 - \$15,000 | None | NONE | |
| | Dodge & Cox International Stock Fund | \$1,001 - \$15,000 | None | NONE | |
| | Pioneer Oak Ridge Small Cap Growth Fund | \$1,001 - \$15,000 | None | NONE | |
| | DWS Core Fixed IncomeFund | \$1,001 - \$15,000 | None | NONE | |
| | Oppenheimer Main Street Small And Mid Cap Fund | \$1,001 - \$15,000 | None | NONE | |
| | Nuveen NWQMulti Cap Value Fund | \$1,001 - \$15,000 | None | NONE | |
| | CRM Mid Cap Value Fund | \$1,001 - \$15,000 | None | NONE | |
| | Harbor Capital Appreciation Fund | \$1,001 - \$15,000 | None | NONE | |
| | Pioneer Cullen Value Fund | \$1,001 - \$15,000 | None | NONE | |
| | Western Asset Core Plud Bond Portfolio | \$1,001 - \$15,000 | None | NONE | |
| | American Century Growth Fund | \$1,001 - \$15,000 | None | NONE | |
| | Artio Intern Equity Fund II | \$1,001 - \$15,000 | None | NONE | |

| SCHED | SCHEDULE III - ASSETS AND "UNEARNED" INCOME | | Name Michael G. Fitzpatrick | | Page 5 of 7 |
|-------|--|------------------------|-----------------------------|------|-------------|
| | Eaton Vance Income Fund | \$1,001 - \$15,000 | None | NONE | |
| 1 | RS Global Natural Resources | \$1,001 - \$15,000 | None | NONE | |
| | American Bond Fund | \$15,001 - \$50,000 | None | NONE | |
| | JP Morgan Strategic Income Opp Fund | \$1,001 - \$15,000 | None | NONE | |
| | Victory Small Company Opp Fund | \$1 - \$1,000 | None | NONE | |
| | Fidelity Advanced Share Fixed Income Fund | \$1,001 - \$15,000 | None | NONE | |
| | Legg Mason Clearbridge Aggresicve Growth Fund | \$1,001 - \$15,000 | None | NONE | |
| | Munder Midcap Core Growth Fd | \$1,001 - \$15,000 | None | NONE | |

SCHEDULE VIII - POSITIONS

Name Michael G. Fitzpatrick

Page 7 of 7

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

| Position | Name of Organization |
|--------------|--|
| Board Member | YMCA of Lower Bucks County |
| Board Member | Bucks County Council Boy Scouts of America |
| Board Member | Archdiocese of Philadelphia, Catholic Health Care Services |
| Board Member | Wesley Enhanced Living |
| Board Member | Self Help, Inc. |
| | |